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2143

Modified Version of PTO/SB/21

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	3	Attorney Docket Number	JWU-101/US
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<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

FIRM NAME	LUMEN INTELLECTUAL PROPERTY SERVICES, Inc.		
SIGNATURE	<u>Ron Jacobs</u>		
PRINTED NAME	Ron Jacobs		
DATE	3/23/07	REGISTRATION NUMBER	50,142

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:

SIGNATURE	<u>Abigail Capulong</u>
PRINTED NAME	Abigail Capulong
DATE	3/23/07

This collection of information is required by 37 CFR 1.51. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 USC 122 and 37 CFR 1.11 and 1.14.

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